



# GRANT APPLICATION COVER PAGE

These forms must accompany each application. They may be completed with a typewriter or downloaded from the NAC website. Only 1 application per program per deadline per organization. See individual grant program guidelines for additional application forms and requirements.

## Check the grant program this application is for:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Artists in Schools/Communities | <input type="checkbox"/> Multicultural Awareness     | <input type="checkbox"/> Touring Program Event |
| <input type="checkbox"/> Education Project Grant        | <input type="checkbox"/> Multicultural Assistance    | <input type="checkbox"/> Other                 |
| <input type="checkbox"/> Collaborative Project Grant    | <input type="checkbox"/> Special Opportunity Support |  |

## Check applicable deadline:

- ☐ March 1, 2003   ☐ October 1, 2003   ☐ Floating deadline (6 weeks prior to project start date)   ☐ Touring Event

1. Organization's Legal Name \*:

**\*New applicants & groups using this organization as their fiscal agent must complete New Applicant/Fiscal Agent form, too.**

2. Address:

City/State/Zip:

3. Contact person's name & title:

4. Daytime phone:

Evening phone:

FAX:

5. Email address:

Website:

6. Project start date:

Project end date:

7. This grant will support visiting foreign artists or professional development in a foreign country ☐ yes ☐ no

8. Facility where project will take place:

seating capacity of facility:

Funding is requested under multicultural guidelines (check with NAC staff) ☐ yes ☐ no

9. Project Title:

**Summarize project here in one or two sentences:**

## Also fill out the Project Statistics and Accessibility Checklist to complete this application.

Personnel Summary for this project		Number	Budget Summary (transfer from budget page[s])		Amount
Full time employees:			Your request from the NAC:		\$
Part time employees:			+ Total Applicant Cash Income:		\$
Volunteers:			= Total Income:		\$
Board members:			Total Cash expenses:		\$
Participating artists:			(income should equal expenses)		

## Read & sign:

I do hereby certify that the board of directors of this organization has given formal approval for submission of this application and that all figures, facts, and representations made in this application are true and correct to the best of my knowledge. Submission of the application signifies intention of compliance with all guidelines and restrictions imposed by the Nebraska Arts Council, a state agency, and the National Endowment for the Arts, a federal agency. This organization will comply with Title VI of the 1964 Civil Rights Act; the Drug Free Workplace Act of 1988, Title IX of the Education Amendments of 1972 (if applicable) and Section 504 of the Rehabilitation Act of 1973. All information submitted in this application and the subsequent filing of the Performance Evaluation and Final Report are available for public inspection.

**The signatures of two different individuals are required:**

Contact person (same as line 3)

date

Board chair or other officer of applicant organization

date

Name/title:

Address:

**This form is the top page of your application. Collate New Applicant/Fiscal Agent information (if applicable), Project Statistics and Accessibility Checklist beneath it in that order. Thanks!**

Please provide the following information if your organization has never applied for a NAC grant, or has not applied since 1998. This information will be kept on file at the NAC. The NAC cannot process your application without it.

## NEW APPLICANT INFORMATION

Federal Employer Identification Number:

The state of Nebraska requires organizations to have a FEID number before it can issue grant award checks. FEID application form SS-4 can be obtained from the Internal Revenue Service. The IRS will send the organization its number approximately six weeks after the application is sent in.

**Tax exempt status with IRS enclosed with application:** ☐ yes ☐ not applicable ☐ sales tax exemption (see item C)

- A. Nonprofit organizations most commonly submit a copy of the 501(c)(3) status letter from the IRS, or proof that the organization has applied for federal tax-exempt status.
- B. Public schools and other divisions of government should check not applicable
- C. Churches, synagogues, mosques, or other religious organizations should submit a copy of their state sales tax exemption certificate from the Nebraska Department of Revenue.
- D. Nebraska Touring Program applicants check "not applicable."

Date of Organization's Incorporation:

- The NAC checks with the Nebraska Secretary of State to confirm your organization's nonprofit status. If you have questions about your organization's nonprofit status, contact the Corporations office of the Secretary of State office, 402-471-2554. Organizations must renew their Nonprofit status every 2 years. There is a fee for renewal.
- Divisions of government should write **not applicable**.

County of organization:

Nebraska Legislative District number:

\_\_\_\_\_

U.S. Congressional District number:

\_\_\_\_\_

If you are unsure about your organization's legislative districts, a complete state district map can be found on the Nebraska Legislature website, [www.unicam.state.ne.us/districts/index.htm](http://www.unicam.state.ne.us/districts/index.htm). This website will also inform you of who your elected representatives are. If your county is divided into more than one Legislative District, you can contact your county election commission for more information. For Douglas and Sarpy Counties, voter precinct information is available at [www.444vote.net](http://www.444vote.net), and for Lancaster County, [www.ci.lincoln.ne.us/cnty/election/](http://www.ci.lincoln.ne.us/cnty/election/).

Please provide the following information if a group other than the applicant organization will plan and conduct the project. The NAC cannot process your application without it.

## \* FISCAL AGENT INFORMATION

Groups or individuals using a legally incorporated organization as their fiscal agent should provide information about the fiscal agent for Cover Page questions 1 through 4 and the Personnel Summary. The Board chair signature must be that of the fiscal agent organization. Provide the following information about the group **organizing** the project:

Name of group organizing project:

\_\_\_\_\_

Project Leader's name:

\_\_\_\_\_

Project Leader's address:

\_\_\_\_\_

City/State/Zip:

\_\_\_\_\_

Project Leader's daytime phone:

Evening:

FAX:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Project Leader's email: \_\_\_\_\_ Website address:

\_\_\_\_\_

**NOTE: You must also submit a signed letter of agreement between the group organizing the project and the fiscal agent (applicant) organization that outlines responsibilities for each party. Contact the NAC for a sample letter of agreement.**

Please provide the following information about your project and organization, to the best of your ability, and submit one copy only with your application. The NAC cannot process your application without it.

## PROJECT STATISTICS

The Nebraska Arts Council collects basic descriptive information about all grant applicants and their projects. The NAC requires this information as part of the National Standard for Arts Information Exchange. The National Endowment for the Arts has awarded funds to the NAC for re-granting to non-profit organizations in Nebraska, and requires these statistics as part of the reporting process for its grants. The following information is for statistical purposes only, and will not be used by panels to make award decisions.

Nebraska Legislative District number: \_\_\_\_\_

U.S. Congressional District number: \_\_\_\_\_

If you are unsure about your organization's legislative districts, a complete state district map can be found on the Nebraska Legislature website, [www.unicam.state.ne.us/districts/index.htm](http://www.unicam.state.ne.us/districts/index.htm). This website will also inform you of who your elected representatives are. If your county is divided into more than one Legislative District, you can contact your county election commission for more information. For Douglas and Sarpy Counties, voter precinct information is available at [www.444vote.net](http://www.444vote.net), and for Lancaster County, [www.ci.lincoln.ne.us/cnty/election/](http://www.ci.lincoln.ne.us/cnty/election/).

### Arts Education (check the appropriate statement)

- ☐ 50% or more of this project's activities are arts education directed to:
- ☐ K-12 students      ☐ Pre-kindergarten      ☐ Higher education students      ☐ Adult learners
- ☐ Some of this project's activities, but less than 50%, are arts education directed to:
- ☐ K-12 students      ☐ Pre-kindergarten      ☐ Higher education students      ☐ Adult learners
- ☐ None of this project involves arts education

### Organizational Characteristics (check only one)

*Select the category that represents at least 50% of the applicant organization's staff, board, or membership*

- ☐ Asian      ☐ American Indian/  
Alaska Native      ☐ Black/African  
American      ☐ Native Hawaiian/  
Pacific Islander      ☐ Hispanic/  
Latino      ☐ White
- ☐ General - no single group listed above represents 50% or more of staff, board, or membership

### Cultural Emphasis of the Project (check only one)

*Check the category that indicates which culture or traditions will be clearly emphasized by project activities and/or target audience*

- ☐ Asian      ☐ American Indian/  
Alaska Native      ☐ Black/African  
American      ☐ Native Hawaiian/  
Pacific Islander      ☐ Hispanic/  
Latino      ☐ White
- ☐ General -- the project will not emphasize any one ethnicity.

### Participant/audience profile *Check all that apply*

- ☐ Asian      ☐ American Indian/  
Alaska Native      ☐ Black/African  
American      ☐ Native Hawaiian/  
Pacific Islander      ☐ Hispanic/  
Latino      ☐ White

### Artist profile *Check all that apply*

- ☐ Asian      ☐ American Indian/  
Alaska Native      ☐ Black/African  
American      ☐ Native Hawaiian/  
Pacific Islander      ☐ Hispanic/  
Latino      ☐ White

### Project Type

*Check which description is most appropriate for your project*

- ☐ Presenting/sponsoring event.  
*This grant will support the presentation of exhibitions, performances, readings, screenings, etc. that were created elsewhere and then offered to an audience or participants as part of your project.*
- ☐ Touring.  
*This project will support the movement of artworks and/or artists for performances, readings, screening, etc. to benefit audiences in different geographic areas.*

☐ None of this project involves presenting or touring.